

POSITION	ID NO.	DATE
CLASSIFIER		7 2-6-98
EXAMINER	10308	3-5-98
TYPIST	↓	↓
VERIFIER		
CORPS CORR.		
SPEC. HAND		
FILE MAINT.		
DRAFTING		

INDEX OF CLAIMS

Claim	Date
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SYMBOLS

✓ ..... Rejected

□ ..... Allowed

- (Through number) Canceled

+ ..... Restricted

N ..... Non-elected

I ..... Interference

A ..... Appeal

O ..... Objected

Claim	Date
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